

**Form W-2 Wage and Tax Statement**

Copy B — To Be Filed With  
Employee's FEDERAL Tax Return.

OMB No. 1545-0008  
Department of Treasury  
Internal Revenue Service

Control number 0RI29 2241 00474  
Employer's name, address, and ZIP code  
NB VENTURES INC  
100 WALNUT AVE FLOOR 3  
CLARK NJ 07066

1	Wages, tips, other comp.	31624.41	2	Federal income tax withheld	3788.56
3	Social security wages		4	Social security tax withheld	
5	Medicare wages and tips		6	Medicare tax withheld	
7	Social security tips		8	Allocated tips	
9			10	Dependent care benefits	
11	Nonqualified plans		12a	C	25.80
			12b	D	1432.53
			12c	DD	345.00
			12d		
13	Statutory retirement plan	Third-party sick pay			
Employee's social security no.		513-73-6522	14		
Employer ID number (EIN)		22-3721259			
15	St. Employer's state ID number	IL 22-3721259	16	State wages, tips, etc.	31624.41
			17	State income tax	1506.60
18	Local wages, tips, etc.		19	Local income tax	
			20	Locality name	

**Form W-2 Wage and Tax Statement**

Copy 2 — To Be Filed With  
Employee's State, City, or Local  
Income Tax Return.

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